Name in Full Elmer Anderson

Certificate of Death

Died at Town Preston County Caroline MARYLAND

Date 1899 Month 11 Day 21 | Age Y. 1 M. 6 D. | Native of 2nd | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of Wife

Father's Name W. Henderson

Mother's Name Eliza Anderson

Cause of Death: Primary Bronchial Pneumonia — How long sick 2 days

Immediate 71 — Accident, Suicide, Homicide

Reported by C. P. Richardson M.D.

Address Preston Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65065

Name in Full

Certificate of Death

Lewis Brummd

Died at Federalsburgh Town, Caroline County, MARYLAND

Date 1899 Month Nov Day 2 Age Y. 6 M. D. Native of America Occupation none

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ of Wife

~~Father's~~ Name George Brummd Mother's Name Mary E Phillis

Cause of Death { Primary Marasmus 8 2 How long sick 14 days

Immediate

~~Accident Suicide~~ Homicide

Reported by R Kemp Jefferson

Address Federalsburg Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5068

Name in Full

Certificate of Death

Wm. F. Krieger

Town

County

Died at near Choptank Caroline MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
11	12					

Date 1899

Age

Male ~~Female~~ White Colored Married Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Denton Journal 11-25-

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79898

Name in Full

Certificate of Death

Maud Miller

Died at Town: Goer County: Caroline MARYLAND

Date 189 9 Month: Nov. Day: 20 | Age Y.: 18 M.: 4 D.: 29 | Native of: Del | Occupation: ——

~~Male~~ / Female | White / ~~Colored~~ | Married / ~~Single~~ | ~~Widow~~ / Widower | ~~Divorced~~ | Number of children living 1

~~Husband~~ / Wife of Frank Miller

Father's Name: John A. Bridegroom | Mother's ~~Name~~: Mary A. Bridegroom

Cause of Death — Primary: Typhoid Fever / How long sick: 22 days

Immediate: Collapse

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by J. Dustadway M. D.

Address Fowling Creek Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85466

Name in Full

Certificate of Death

Alexander Stiller

Died at Town: Hobbs County: Caroline MARYLAND

Date 189 Month: 11 Day: 1 | Age Y. 35 M. D. | Native of | Occupation

Male / ~~Female~~ | White / Colored | Married / Single | Widow / Widower | Divorced / Number of children living

Husband of

Wife

Father's Name Wm. H. Stiller

Mother's Name

Cause of Death — Primary: Consumption 2 2a — Immediate:

How long sick

Accident, Suicide, Homicide

Reported by Denton Journal 11-4

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898